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|---|--|--|---------------------------|
| <b>NOTICE OF APPEAL FROM THE EXAMINER TO<br/>THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>  |  | <b>Docket Number (Optional)</b><br>04995/049001  |                           |
|   |  | In re Application of<br>Tsutomu Inada  |                           |
|   |  | Application Number<br>10/066,885-Conf. #4838   | Filed<br>February 4, 2002 |
|   |  | For OPTICAL PICKUP ACTUATOR CIRCUIT HAVING COIL<br>PROTECTION FEATURE  |                           |
|   |  | Art Unit<br>2652   | Examiner<br>P. V. Agustin |
| Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.  |  |  |                           |
| The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))   |  | \$ 500.00  |                           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:  |  | \$   |                           |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |  |  |                           |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |  |  |                           |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.  |  |  |                           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0591</u> . I have enclosed a duplicate copy of this sheet. |  |  |                           |
| <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.   |  |  |                           |
| I am the  |  |  |                           |
| <input type="checkbox"/> applicant /inventor.   |  | <br>Signature<br>Jonathan P. Osha<br>Typed or printed name |                           |
| <input type="checkbox"/> assignee of record of the entire interest.<br>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |  |  |                           |
| <input checked="" type="checkbox"/> attorney or agent of record.<br>Registration number <u>33,986</u>   |  |  |                           |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34. _____  |  | (713) 228-8600<br>Telephone number   |                           |
|   |  | April 28, 2006<br>Date   |                           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.                            |  |  |                           |
| <input type="checkbox"/> *Total of <u>1</u> forms are submitted.  |  |  |                           |

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